

**UNITED STATES BANKRUPTCY COURT
NORTHERN DISTRICT OF ILLINOIS
EASTERN DIVISION**

In re:

MICHELLE MARIE BRINK

Debtor(s)

Case No. 05-48475

CHAPTER 13 STANDING TRUSTEE'S FINAL REPORT AND ACCOUNT

Glenn Stearns, chapter 13 trustee, submits the following Final Report and Account of the administration of the estate pursuant to 11 U.S.C. § 1302(b)(1). The trustee declares as follows:

- 1) The case was filed on 10/11/2005.
- 2) The plan was confirmed on 03/14/2006.
- 3) The plan was modified by order after confirmation pursuant to 11 U.S.C. § 1329 on NA.
- 4) The trustee filed action to remedy default by the debtor in performance under the plan on NA.
- 5) The case was completed on 03/10/2010.
- 6) Number of months from filing to last payment: 53.
- 7) Number of months case was pending: 56.
- 8) Total value of assets abandoned by court order: NA.
- 9) Total value of assets exempted: \$9,500.00.
- 10) Amount of unsecured claims discharged without payment: \$7,726.00.
- 11) All checks distributed by the trustee relating to this case have cleared the bank.

Receipts:

Total paid by or on behalf of the debtor	\$94,616.53
Less amount refunded to debtor	\$0.00

NET RECEIPTS: **\$94,616.53**

Expenses of Administration:

Attorney's Fees Paid Through the Plan	\$1,759.00
Court Costs	\$0.00
Trustee Expenses & Compensation	\$4,491.83
Other	\$0.00

TOTAL EXPENSES OF ADMINISTRATION: **\$6,250.83**

Attorney fees paid and disclosed by debtor: \$771.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
A R CONCEPTS	Unsecured	112.00	NA	NA	0.00	0.00
AMERICREDIT FINANCIAL	Unsecured	11,122.00	14,371.91	14,371.91	14,371.91	0.00
AMERICREDIT FINANCIAL	Secured	16,500.00	13,525.00	13,525.00	13,525.00	1,577.78
CAROL STREAM FIRE PROTECTION	Unsecured	218.00	NA	NA	0.00	0.00
CENTRAL DUPAGE HOSPITAL 1	Unsecured	3,672.00	NA	NA	0.00	0.00
CITIFINANCIAL	Secured	NA	NA	NA	0.00	0.00
DELNOR COMMUNITY HOSPITAL	Unsecured	136.00	NA	NA	0.00	0.00
DIABETES INTENSIVE MGT	Unsecured	102.00	NA	NA	0.00	0.00
DUPAGE SURGICAL CONSULTANTS	Unsecured	1,060.00	NA	NA	0.00	0.00
ECAST SETTLEMENT CORPORATION	Unsecured	9,439.00	9,439.31	9,439.31	9,439.31	0.00
EMERGENCY & AMBULATORY CARE	Unsecured	155.00	NA	NA	0.00	0.00
FORD MOTOR CREDIT CO	Secured	22,475.00	22,475.00	22,475.00	22,475.00	2,621.86
FORD MOTOR CREDIT CO	Unsecured	NA	10,298.48	10,298.48	10,298.48	0.00
GUARDIAN ANESTHESIA ASSOC	Unsecured	557.00	NA	NA	0.00	0.00
ILLINOIS UROLOGICAL INSTITUTE	Unsecured	445.00	NA	NA	0.00	0.00
ISLAND NATIONAL GRP	Unsecured	NA	NA	NA	0.00	0.00
JEFFERSON CAPITAL SYSTEMS	Unsecured	NA	1,987.66	1,987.66	1,987.66	0.00
LABORATORY PHYSICIANS LLC	Unsecured	10.00	NA	NA	0.00	0.00
MIDWEST PATHOLOGY	Unsecured	124.00	NA	NA	0.00	0.00
NATIONAL CITY MORTGAGE	Secured	846.40	846.40	846.40	846.40	0.00
NATIONAL CITY MORTGAGE	Secured	NA	NA	NA	0.00	0.00
ORTHOPAEDIC ASSOC OF DUPAGE	Unsecured	95.00	NA	NA	0.00	0.00
PIER I IMPORTS INC	Unsecured	335.00	334.75	334.75	334.75	0.00
RESURGENT CAPITAL SERVICES	Unsecured	9,261.00	9,261.16	9,261.16	9,261.16	0.00
RJM ACQUISITIONS LLC	Unsecured	NA	NA	NA	0.00	0.00
ROUNDUP FUNDING LLC	Unsecured	486.00	607.56	607.56	607.56	0.00
RUSH COPLEY MEDICAL CENTER	Unsecured	570.00	NA	NA	0.00	0.00
SALLIE MAE SERVICING CORP	Unsecured	NA	NA	NA	0.00	0.00
SILVERLEAF RESORT INC	Secured	NA	NA	NA	0.00	0.00
TRI CITY RADIOLOGY	Unsecured	44.00	NA	NA	0.00	0.00
VALLEY AMBULATORY SURGERY	Unsecured	112.00	NA	NA	0.00	0.00

Scheduled Creditors:

Creditor Name	Class	Claim Scheduled	Claim Asserted	Claim Allowed	Principal Paid	Int. Paid
VALLEY EMERGENCY CARE	Unsecured	144.00	144.00	144.00	144.00	0.00
WELLS FARGO FINANCIAL INC	Unsecured	897.00	874.83	874.83	874.83	0.00
WEST CENTRAL ANESTHESIOLOGY	Unsecured	314.00	NA	NA	0.00	0.00

Summary of Disbursements to Creditors:

	Claim <u>Allowed</u>	Principal <u>Paid</u>	Interest <u>Paid</u>
Secured Payments:			
Mortgage Ongoing	\$0.00	\$0.00	\$0.00
Mortgage Arrearage	\$846.40	\$846.40	\$0.00
Debt Secured by Vehicle	\$36,000.00	\$36,000.00	\$4,199.64
All Other Secured	\$0.00	\$0.00	\$0.00
TOTAL SECURED:	\$36,846.40	\$36,846.40	\$4,199.64
Priority Unsecured Payments:			
Domestic Support Arrearage	\$0.00	\$0.00	\$0.00
Domestic Support Ongoing	\$0.00	\$0.00	\$0.00
All Other Priority	\$0.00	\$0.00	\$0.00
TOTAL PRIORITY:	\$0.00	\$0.00	\$0.00
GENERAL UNSECURED PAYMENTS:	\$47,319.66	\$47,319.66	\$0.00

Disbursements:

Expenses of Administration	<u>\$6,250.83</u>	
Disbursements to Creditors	<u>\$88,365.70</u>	
TOTAL DISBURSEMENTS :		<u>\$94,616.53</u>

12) The trustee certifies that, pursuant to Federal Rule of Bankruptcy Procedure 5009, the estate has been fully administered, the foregoing summary is true and complete, and all administrative matters for which the trustee is responsible have been completed. The trustee requests a final decree be entered that discharges the trustee and grants such other relief as may be just and proper.

Dated: 06/04/2010

By: /s/ Glenn Stearns

Trustee

STATEMENT: This Unified Form is associated with an open bankruptcy case, therefore, Paperwork Reduction Act exemption 5 C.F.R. § 1320.4(a)(2) applies.